



**PWYLLGOR SICRWYDD DEDDFWRIAETH IECHYD MEDDWL  
MENTAL HEALTH LEGISLATION ASSURANCE COMMITTEE**

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	02 March 2021
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Update from Quality Safety & Experience Group
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Andrew Carruthers
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Aileen Flynn Service Transformation and Partnerships Manager

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Er Gwybodaeth/For Information

**ADRODDIAD SCAA  
SBAR REPORT**

**Adult Mental Health update in response to COVID - 19**

Aspects of the strategy aligned to Transforming Mental Health (7 day services, Central Assessment/Treatment Units, Soft 136, Third Sector prevention services) have been accelerated at pace during the Pandemic, in order to provide extended and more efficient Mental Health services. The expectation is that these improvements will continue in the long-term based on the outcome of respective evaluations.

The co-location of some of the Crisis Resolution Home Treatment Teams (CRHTs) and Community Mental Health Teams (CMHTs) has taken place to deliver intensive home treatment or a community assessment for new patients alongside the care and treatment provided for our 'Relevant Patients' who are patients that meet the criteria for secondary mental health care under the Mental Health (Wales) Measure. This extended service allows for increased access to the team for service users and for staff to work more flexibly with reduction numbers of staff in our building in order to adhere to social distancing requirements. To fully implement this arrangement across Carmarthenshire and Pembrokeshire an organisational change process will be required to enable 3 teams to become Community Mental Health Centres alongside four Community Mental Health Teams which will operate extended hours over seven days.

The S136 Place of Safety was centralised to Bryngofal Ward, Llanelli during the Pandemic and this arrangement has continued in accordance with the implementation of the Transforming Mental Health agenda. The Alternative Place of Safety in Ceredigion and Pembrokeshire are both operational 24/7 at weekends, with plans for this to be extended 24 hours a day over a 7 day week. As we develop the CMHC in Pembrokeshire the Community team will manage the Alternative Place of Safety. There have been some challenges for staff and service users with regard to the one location of the S136 suite however it is envisaged that this will improve as Ceredigion and Pembrokeshire's Alternative Places of Safety are fully established.

The Health Board has been working with Welsh Government to implement a pilot for a Mental Health Single Point of Contact (SPOC) via the national 111 service. This is a regional pilot in conjunction with Swansea Bay University Health Board and Aneurin Bevan Health Board. The structure of the pilot means that local care is provided by locality based teams via the national number. We have successfully recruited a range of MH Practitioners and administrative staff, with the service going live on 23<sup>rd</sup> January 2021. Feedback has been very positive with the service undertaking an initial triage ensuring seamless referrals to Third Sector and specialist Mental Health services where necessary. The initial pilot will operate weekends only for a 3

month period, during which time it will be fully evaluated and reviewed. Following this the service is expected to increase its provision across 7 days a week. In line with this, the health board is currently in early discussions to pilot a SPOC in Carmarthenshire which will provide a single referral route for all GPs for urgent and routine requests for assessment.

A conveyance scheme to support service user flow to and from inpatient settings has been developed and is now operational. This will support inpatient flow and add capacity to the workforce. We are currently in early discussions with Welsh Government to determine the feasibility of piloting a transport service across Hywel Dda through St. Johns Ambulance for Mental Health Act Assessments, discharges from home and inter ward transfers.

A Psychiatric Liaison Service is in development across the four District General Hospital (DHG) sites as an essential service. Carmarthen was identified as a pilot site and service development continues as we integrate Adult Mental Health into our existing Older Adult Liaison Service. The Service will provide a single cross age/speciality liaison team with a single point of referral across the Hywel Dda footprint for adult, older adult and learning disability individuals. A Senior Nurse and Consultant Psychiatrist have been appointed in order to lead, develop and recruit staff into the team. Further to this we have recently appointed 2 Senior Nurses and an Advanced Nurse Practitioner to further develop the service.

Child and Adolescent Mental Health Services (CAMHS) have a crisis service that responds to young people admitted to our DGH's in core hours. Out of hours this team will co-locate with the new Liaison Service based in Carmarthen on the Glangwili hospital site.

During the Pandemic, in-patient services were reviewed to reduce bed numbers to allow for social distancing on the wards alongside the required 'red' and 'green' areas in line with infection control procedures. This includes a twice daily seven day a week adult mental health MS Team meeting to discuss potential admissions, leave or discharges from our wards as well as community treatment plans for individuals requiring intensive input at home. This operational arrangement has resulted in reduced bed occupancy as the requirement of a multi-disciplinary clinical meeting to agree an assessment outcome prior to admission has proved effective. For staff and patients this is a positive position and is in accordance with the benchmark from the Royal College of Psychiatrists for 85% bed occupancy, although current acuity is high.

In line with the Mental Health Delivery Plan objective on providing out of hours crisis care the Health Board has extended its pilot provision for Sanctuary and Hospitality Bed services. Following the success of the initial pilot in Llanelli a second service opened in Pembrokeshire in December, with Ceredigion services planned to go live in April 2021. All of the services will be fully evaluated and reviewed during the pilot phase.

### **Older Adult Mental Health**

The Memory Assessment Service team has been restructured with the Older Adult CMHT to provide a 7 day a week service. All referrals across both services come into a single point and are triaged/risk assessed for urgency and safety.

The Dementia Well-being Team have developed guidance [Socially Isolating Individuals Living with Dementia] for care staff to support them looking after people living with Dementia during the Covid -19 lockdown period for use in Care Homes, Field and Acute Hospitals. The psychologist for this team has also been co-opted to work alongside the Long Term Care Team to support staff resilience in Care Homes.

### **Learning Disabilities**

All non-essential services have been paused during this time. Community teams have focused on maintaining regular or frequent contact with existing clients based on a RAG rated system of risk assessment which is reviewed weekly. Face to face contact has occurred during this time but is only undertaken in exceptional or emergency situations. All new referrals have been

screened wherever possible via virtual platforms or have been placed on waiting lists where non-urgent.

Local Authorities have taken the decision to close all day and respite services which has increased risks to many of our clients. Although referrals have dropped by approximately 80-90% during this period, the volume of activity in monitoring and maintaining contact with clients, carers, families and providers has increased significantly. Local Authorities continue to review the provision of day and respite, but no agreed plans are in place for re-commencing.

Further risks have been highlighted due to staff having to Shield. This has reduced the capacity of our residential staff and has placed additional pressure on remaining staff. The service is undertaking risk assessments for these staff members and considering alternative non-clinical roles where appropriate.

The Service has seen an increase in Waiting Times Breaches due to the Pandemic, as many assessments have had to be deferred if non-urgent. Additionally, many of the referrals received have been for training purposes, which have not been possible to undertake.

### **Inpatient Model**

The 'Intensive Support Team' continues as a pilot project to look at proof of concept which will provide intensive or additional outreach support for a time limited period for clients with a learning disability.

Further work into identifying a future inpatient service delivery model for those people with a learning disability who have a primary mental health condition is being explored within the TLD/TMH programme of work.

### **Residential Model**

Health assessment of needs and risk have been completed for each client in the two Pembrokeshire properties, looking at levels of need. This has been a joint approach between local CTLDs, MH&LD Commissioning Team and the Quality Assurance Improvement Team of the National Collaborative Commissioning Unit. Staffing levels are subsequently being reviewed based on the client reviews which will inform safer staffing establishment per unit.

### **LD Health Action Team**

Recruitment has taken place for the Primary Health Action Team. This will allow a strengthening of links with Primary Care Clusters and GP practices to support an increased take-up of annual health checks and the earlier identification and management of physical and mental health problems which are specifically associated with learning disabilities. The team has identified some priority areas for development to further support primary care working pathways including:

- PMLD
- Epilepsy
- Behaviours that Challenge
- Mental Health
- Physical Health

### **Specialist Child and Adolescent Mental Health (S-CAMHS)**

To facilitate contact with the Child/Young Person (CYP) and their families during the Pandemic the team have utilised alternative communication methods including telephone and digital platforms such as Microsoft Teams, Attend Anywhere and Patient Knows Best. Home visits which are deemed essential home visits are risk assessed prior to any visits taking place with appropriate PPE and social distancing measures put in place.

During COVID – 19 the following measures have been put into practice across the service:

- Essential treatment and management is conducted in Non-COVID – 19 clinic areas.
- 'My Health passport' has been rolled out and distributed with the wider MDT.

- Staff are ensuring that families who are shielding are supported with daily essentials.
- S-CAMHS Crisis Teams have been restructured to consolidate and maintain service continuity over 7 days for crisis and assessment work.
- S-CAMHS low risk patients have been discharged to ensure that there is effective support for higher risk patients.
- Discharged patients/ low risk patients at point of referral signposted to other support agencies, with ability to access the S-CAMHS Single Point of Contact if required.
- S-CAMHS Crisis teams have continued face-to-face working/contact with all high risk cases.
- The Early Intervention Psychosis Service has moved to a 7 day service, to enable effective support for this high risk/vulnerable group.

The Health Board utilised the Mental Health Service Improvement Fund in October 2020 to strengthen our response to improving the access, quality and range of Psychological therapies for the changing needs of children and young people as follows:

- Development of a Specialist Community Eating Disorder Service which comprises 1 X Eating Disorder Lead, 2 X Eating Disorder Practitioners, 1 Dietitian and 1 CBT Therapist. This will enable the recommendations of the National Review of Eating Disorders to be implemented, providing earlier intervention, implement NICE standards and work towards meeting the 4 week waiting time. This service will align closely to the Adult T3 Eating Disorder Service, which will address key issues in respect of Transition from SCAMHS to Adult Mental Health Services.
- Expansion of EIP services including 1 X CPN Practitioner, 1 X Health Care Support Worker, 1 X CBT Therapist and 1 X Occupational Therapist to meet the policy commitment of Welsh Government for earlier intervention for FEP/EIP and to increase the age range to 14-65.
- Enhance the skills within the Perinatal Mental Health team through targeted training, which will enable the current team to deliver evidence based practice and Psychological therapy as directed by NICE and the Royal College Standards for community perinatal mental health services.
- Development of a DBT Service which comprises 1 X CBT/DBT Lead and 2 X DBT Practitioners to address young people who present with persistent and enduring self-harm or suicidal behaviour and other high risk taking behaviours often associated with emerging personality disorders. This service will be closely aligned with the Adult DBT Service thus increasing access and transition at a time when young people are most vulnerable and at highest risk of drop out from mental health services.

The Health Board contributed to the consultation on the code of practice on the provision of autism services in December 2020. We are currently looking at the Mental Health Service Improvement Fund 2021/21 with a focus on ASD service developments in line with the early help and enhanced support work stream within the September 2021 target date.

The school in reach service in Ceredigion continues to deliver consultation support and resilience building for teachers and educators. However, the funding for this initiative comes to an end in July 2021 and we are currently looking at how to make this more sustainable and extend to the other 2 local authority areas.

The Children & Young People SPOC is now fully operational 6 days a week. The service is flexible to extend to 7 days a week dependent on need. We continue to receive a high level of

referrals into SCAMHS with a much higher acuity, with more interventions required from crisis teams. The impact of COVID-19 in providing face to face interventions has slowed service delivery and increased waiting times. However, we have introduced Saturday clinics to help alleviate this waiting lists.

Further to this we have commissioned Kooth to run a 6 month digital platform pilot providing early intervention and treatment to CYP suffering from varying mental health conditions. Aligning with the Thrive model, Kooth provides early help for mild, moderate and complex needs. Early help can range from self-help advice resources from a magazine article, to a key worker on Kooth supporting a CYP with accessing the appropriate services to support them. Alongside this we are currently looking into other digital training resources for staff such as Stress Control training.

### **Commissioning**

The MHL D Commissioning Team have expanded their discharge liaison activities to co-ordinate patient transfers and support patient flow from inpatient settings. The team are currently taking a lead role in identifying placements and facilitating transfers. The team have broadened and developed relationships with providers, care co-ordinators and Local Authority budget holders to accelerate the discharge process in order to support service user flow and ward capacity.

Throughout the Pandemic the Health Board has supported its Third Sector services though establishing individual monthly Touch Point meetings with providers to ease sector anxieties. We have worked collaboratively with organisations to develop safe ways of providing support alongside Social Distancing Guidance, including supporting the sector to develop robust risk assessments and pilot new ways of innovative service delivery through online, telephone and social media.

In November 2020, the Welsh Government provided funding of £200k up until March 31st 2021 to provide a range of Tier 0 services to support our communities through the Pandemic. Alongside this the Health Board added additionality of £100k to ensure provision of services across all areas of need. Following a robust multi-agency scrutiny panel 8 Third sector organisations were allocated funding to provide services as follows:

- Community Advocacy
- Befriending services for adults
- Digital counselling for CYP
- Befriending and sit in services for older adults
- Men's community groups
- Financial & Welfare Rights Support
- Befriending and support services for Veterans

All services have been up and running since December with increasing referrals week on week.

### **Argymhelliad / Recommendation**

The Committee are requested to receive this paper for information.

**Amcanion: (rhaid cwblhau)**

**Objectives: (must be completed)**

Cyfeirnod Cofrestr Risg Datix a Sgôr

Cyfredol:

Datix Risk Register Reference and

Score:

Safon(au) Gofal ac Iechyd: Health and Care Standard(s): <a href="#">Hyperlink to NHS Wales Health &amp; Care Standards</a>	3.3 Quality Improvement, Research and Innovation Choose an item. Choose an item. Choose an item.
Amcanion Strategol y BIP: UHB Strategic Objectives: <a href="#">Hyperlink to HDdUHB Strategic Objectives</a>	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners. Choose an item. Choose an item. Choose an item.
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Statement</a>	Improve Population Health through prevention and early intervention Support people to live active, happy and healthy lives Improve efficiency and quality of services through collaboration with people, communities and partners Choose an item.

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	
Rhestr Termiau: Glossary of Terms:	QS&EG : Quality Safety & Experience Group MHLSG : Mental Health Legislation Scrutiny Group NICE: National Institute for Health and Care Excellence SCAMHS: Specialist Child and Adolescent Mental Health Service
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	e.g. financial impact or capital requirements: (if yes, please complete relevant section of the integrated impact assessment template available via the link below) <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	e.g. adverse quality and/or patient care outcomes/impacts: (if yes, please complete relevant section of the integrated impact assessment template available via the link below) <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>
<b>Gweithlu: Workforce:</b>	e.g. adverse existing or future staffing impacts: (if yes, please complete relevant section of the integrated impact assessment template available via the link below) <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>

<b>Risg:</b> <b>Risk:</b>	e.g. risks identified and plans to mitigate risks: (if yes, please complete relevant section of the integrated impact assessment template available via the link below) <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>
<b>Cyfreithiol:</b> <b>Legal:</b>	e.g. legal impacts or likelihood of legal challenge: (if yes, please complete relevant section of the integrated impact assessment template available via the link below) <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>
<b>Enw Da:</b> <b>Reputational:</b>	e.g. potential for political or media interest or public opposition: (if yes, please complete relevant section of the integrated impact assessment template available via the link below) <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>
<b>Gyfrinachedd:</b> <b>Privacy:</b>	e.g. potential for data breaches: (if yes, please complete relevant section of the integrated impact assessment template available via the link below) <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>
<b>Cydraddoldeb:</b> <b>Equality:</b>	e.g. potential negative/positive impacts identified in the Equality Impact Assessment (EqIA) documentation – follow link below <ul style="list-style-type: none"> <li>• Has EqIA screening been undertaken? Yes/No (if yes, please supply copy, if no please state reason)</li> <li>• Has a full EqIA been undertaken? Yes/No (if yes please supply copy, if no please state reason)</li> </ul> <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>